In the Court of Appeals of the State of Alaska

Barry McCormack,

Appellant,

V.

State of Alaska,

Appellee.

Court of Appeals No. A-12275

Notice of Intent to Enter Judgment For Cost of Appointed Attorney

Date of Notice: 9/18/2019

Trial Court Case No. 3KN-10-00174CI

Unless you or the prosecutor objects by 11/4/2019 (you may use the enclosed form to file an objection), the court or clerk will enter a judgment against you for the cost of your appointed attorney as indicated below:

| Type of Appellate Proceeding | Misdemeanor | Felony |
|--|-------------|--------|
| Sentence Appeal or Petition for Sentence Review | \$ 250 | \$ 500 |
| Merit Appeal or Appeal from Post-Conviction Relief Proceedings | 750 | 1,500 |
| Combined Merit and Sentence Appeal or Petition for Sentence Review | 1,000 | 2,000 |
| Other Appellate Actions (Petition for Review, Petition for Hearing, Original Application) | 500 | 1,000 |

Entered under Appellate Rule 209(b)(6).

Clerk of the Appellate Courts

Kyle Roberts, Deputy Clerk

Barry McCormack 22301 West Alsop Wasilla AK, 99623 Distribution:

Mail: Tapp, Justin Simel, Nancy R

In the Court of Appeals of the State of Alaska

| Barry McCormack, | Court of Appeals No. A-12275 |
|---|--|
| Appellant, | |
| V. | Opposition to Entry of Judgment For Cost of |
| State of Alaska, | Appointed Attorney |
| Appellee. | Date of Notice: 9/17/2019 |
| Trial Court Case No. 3KN-10-00174CI | |
| I oppose the entry of the proposed ju attorney for the following reason(s): | dgment against me for the cost of appointed |
| ☐ My conviction was reversed on appe | eal. |
| ☐ I filed the following type of action amount for this action: | , but the clerk or court assessed the wrong |
| ☐ Sentence Appeal ☐ Combined Merit Appeal an ☐ Petition for Sentence Revie ☐ Petition for Hearing ☐ Merit Appeal ☐ Petition for Review ☐ Appeal from Post-Convict ☐ Original Application ☐ Combined Merit and Sente | ion Relief Proceeding |
| | er more than one judgment against me. This uses were resolved in one court proceeding. |
| | heduled amount because my attorney spent check this box, you must attach a statement rs spent on your case.) |
| ☐ Other | |
| | |
| | |

| Appellant/Petitioner's Daytime Phone | Appellant/Petitioner's Signature | | |
|--|----------------------------------|--------|-----|
| Appellant/Petitioner's Mailing Address | City | State | Zip |
| Mailed to State's Attorney on: | | (Date) | |